



Abortion in the time of COVID-19: perspectives from Malta

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Introduction

Past outbreaks and the current pandemic show that sexual and reproductive health and rights (SRHR) are affected in times of crisis. With a global shortage of contraceptives, rise in domestic violence, job loss and income insecurity, there is an even greater need for abortion to be accessible now. However, abortion laws and access vary across the globe, and the current COVID-19 pandemic has further exposed SRHR inequalities. Some European countries, such as England, Ireland, and France, have rightly moved to telemedicine for early medical abortions. Others capitalise on the pandemic to promote far-right, anti-SRHR policies and further restrict human rights. For example, the parliament in Poland, where abortion access is very limited, attempted to pass an anti-abortion bill at a time when mass protests could not take place. In other jurisdictions, residents never had these rights to begin with. In Malta, EU's smallest member state, barriers have always existed; COVID-19 has laid them bare.

Abortion in Malta pre COVID-19

Malta is a Southern European country with a population of under 500,000. It has one of the most restrictive abortion laws worldwide; it is the only EU country and the only Commonwealth country with a total legal ban. Although there have been progressive socio-legal changes in the last decade (e.g. divorce (2011); same-sex marriage (2017); introduction of emergency contraception (2016)), the country's archaic abortion legislation has not been reformed. Catholicism is enshrined in Malta's constitution, and despite rapid secularisation an overwhelming majority of the population identify themselves as Catholic. Years of indoctrination

have resulted in a predominant anti-abortion sentiment on the island, compounded by over 20 years of a Christian-democratic, conservative government (until 2013). Both main political parties have publicly affirmed their opposition to abortion.

The establishment of a pro-choice movement in 2019 led to an increase in abortion talk in the public sphere, but despite this shift in public discourse abortion remains highly stigmatised in Malta's pronatalist society. Misinformation is spread through various channels: social media, traditional media, school education, and religious institutions. Criminalisation has led to a "chilling effect" in those seeking abortions and in healthcare professionals. Due to the fear of potential legal repercussions, women may delay seeking medical attention in the (rare) event of post-abortion complications, whilst many healthcare professionals in Malta are reluctant to provide information about abortion, even though it is legal to do so. Most abortion experiences remain shrouded in secrecy and silence.

Estimates suggest that over 500 women in Malta access abortions each year.² Many travel to a country with abortion access, but this depends on factors such as financial means and mobility. Another safe – albeit illegal – way to access abortion from Malta is through the online purchase of medical abortion pills (mifepristone and misoprostol) from reputable organisations such as Women Help Women and Women on Web.

Having to travel abroad for healthcare is inhumane and discriminates against individuals who are unable to do so. For those lacking financial means, Abortion Support Network provides financial assistance to Maltese residents, but there are other barriers. A pregnant teenager, a single mother without access to childcare, a woman living with an abusive partner, an individual with

disability, and an asylum seeker lacking travel documentation all face additional obstacles. Unfortunately, there are also anti-abortion organisations targeting women with misinformation and deception to prevent abortion access.³

The situation in Malta during COVID-19

COVID-19 has highlighted the problems of a system in which pregnant people secretly travel for abortions abroad or secretly order abortion pills online. To control the pandemic, Malta suspended inbound flights on the 21st March 2020, meaning that the only legal route to obtain abortions is now much more difficult to access. The travel restrictions have led to an increase in the number of people reaching out to activist and abortion support groups and a surge in people ordering medical abortion pills online.⁴ However, according to World Health Organization (WHO) guidelines, medical abortion with pills can be safely self-managed during the first 12 weeks of gestation (given access to accurate information and to medical care, if needed), leaving those at later gestations in a predicament, Further, if medical abortion pills become unavailable due to disruptions in the supply chain or postal services to Malta closing, then access to abortions may become blocked. There have already been delays in receiving this time-sensitive medication. Unfortunately, Voice for Choice has become aware of unverified and potentially dangerous online sources offering abortion pills in Malta, all created between March and May. ⁵ The current crisis is being exploited for financial gain.

The harmful consequences of COVID-19 on reproductive health are evident in personal testimonies from Malta. One such story is of a woman who experienced extreme anxiety and denial when she found out she was pregnant.⁶ While she waited for abortion pills to arrive from abroad she searched for herbal remedies online and had daily suicidal thoughts. Another woman was unable to purchase her usual contraception and was raped by her abusive partner, which resulted in an unwanted pregnancy. At the beginning of the COVID-19 pandemic the Maltese government ensured an extra stock of medicines to prevent shortages, but oral contraceptive pills were not included because they were not listed as essential. Living in a country with substandard SRHR during a pandemic is untenable. It is likely that pregnant people will resort to unsafe methods to end unwanted pregnancies.

Critique by international bodies

In the last decade, Malta has received criticism on the state of SRHR from international bodies such as the United Nation's Committee on the Elimination of Discrimination Against Women (2010), the United Nation's Committee on the Rights of the Child (2019), and the Council of Europe's Commissioner for Human Rights (2017; 2020). There have been calls for Malta to decriminalise abortion and ensure safe access to abortion and post-abortion care.

The WHO European regional director praised Malta's handling of COVID-19, stating that the public health measures introduced to curb the spread of the virus made it "a country to follow".8 Whilst Malta's government sayours this commendation. it fails to follow WHO guidelines on SRHR. In April, Voice for Choice signed a joint civil society statement, calling on European governments to ensure safe and timely access to abortion care during the COVID-19 pandemic. The statement makes specific reference to the countries where abortion is severely restricted or completely banned, including Malta, imploring states to urgently reform abortion laws as they place women's health, wellbeing, and lives at risk. We forwarded this statement to local Members of Parliament, including Malta's Prime Minister, but there has been no response. More recently, the Council of Europe's Commissioner for Human Rights stated that the situation is particularly worrying for countries like Malta, where people have trouble accessing abortion care abroad. 10 On the 17th April, the European Parliament voted on an action plan to combat the pandemic and its consequences. Among its resolutions is a call on member states to guarantee safe and timely access to SRHR during the COVID-19 pandemic, namely contraception (including emergency contraception) and abortion care. 11 Only one Maltese Member of the European Parliament (MEP) voted in favour of this specific resolution. However, all six Maltese MEPs voted in favour of the final version of the document, which included the amendment to protect SRHR. 12

Concluding remarks

Malta's legislation violates reproductive rights, constitutes structural and symbolic state violence, and perpetrates discrimination and inequality based on sex, socio-economic status, and country of

residence. Women in Malta lack bodily autonomy and are not trusted to make decisions about their own lives. According to international and European human rights law, states have the duty to ensure that SRHR are protected and respected. States' human rights obligations should not be obliterated in times of crisis. Yet Malta's government has made no attempt to address and reform the country's draconian abortion laws, or in any way facilitate access to abortion care abroad during this pandemic. Instead, pregnant people are criminalised for accessing care that should be provided locally. As Voice for Choice has asserted. the Maltese government must heed the European Parliament's call and make abortion services available and accessible. Failure to do so infringes on the human rights of all women and pregnant people in the country. Change is urgently needed. We cannot wait for the pandemic to be over before focusing on SRHR. Abortion is time-sensitive, essential healthcare, and must be prioritised during COVID-19. We should not wait for a tragedy before enacting change. We need to keep fighting for SRHR, not only in the time of this pandemic, but beyond.

Disclosure statement

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